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CONFIRMATION NO. 5783

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|--|---|--------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>10/789,951   | <b>FILING OR 371(c) DATE</b><br>02/27/2004<br><b>RULE</b>   | <b>CLASS</b><br>361            | <b>GROUP ART UNIT</b><br>2835   | <b>ATTORNEY DOCKET NO.</b><br>4015-040425 |
| <b>APPLICANTS</b><br>Daniel M. Tarkoff, Pittsburgh, PA;<br>Dale E. Pfeifer, Washington, PA;<br>John M. Liston, West Mifflin, PA;   |   |                                |   |   |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/450,385 02/27/2003 <i>Yph</i>   |   |                                |   |   |
| <b>** FOREIGN APPLICATIONS *****</b> <i>Done Yph</i>   |   |                                |   |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 05/25/2004</b>   |   |                                |   |   |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |   | <b>STATE OR COUNTRY</b><br>PA  | <b>SHEETS DRAWING</b><br>6  | <b>TOTAL CLAIMS</b><br>29                 |
| Verified and Acknowledged <i>Yph</i><br>Examiner's Signature Initials  |   | <b>INDEPENDENT CLAIMS</b><br>3 |   |   |
| <b>ADDRESS</b><br>Nathan J. Prepelka<br>WEBB ZIESENHEIM LOGSDON ORKIN & HANSON, P.C.<br>700 Koppers Building<br>436 Seventh Avenue<br>Pittsburgh, PA15219-1818   |   |                                |   |   |
| <b>TITLE</b><br>Bracket element for a distribution device enclosure  |   |                                |   |   |
| <b>FILING FEE RECEIVED</b><br>1062   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |